

Fill in this information to identify your case:

| | | | |
|---|-------------------------------|-------------|-----------|
| Debtor 1 | Divya Verma | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Lolita Doodhauth Verma | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | DISTRICT OF MARYLAND | | |
| Case number (if known) | 19-14883 | | |

☐ Check if this is an amended filing
Official Form 107**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.*)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Part 2 Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
 If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

From January 1 of current year until
the date you filed for bankruptcy:

Debtor 1

Sources of income
Check all that apply.

Gross income
(before deductions and
exclusions)

☒ Wages, commissions,
bonuses, tips

☐ Operating a business

\$10,781.00**Debtor 2**

Sources of income
Check all that apply.

Gross income
(before deductions
and exclusions)

☒ Wages, commissions,
bonuses, tips

☐ Operating a business

Unknown

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

| | Debtor 1 | | Debtor 2 | |
|---|--|--|--|--|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calendar year: (January 1 to December 31, 2018) | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$59,677.72 | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$64,565.00 |
| For the calendar year before that: (January 1 to December 31, 2017) | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$54,710.00 | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$42,105.00 |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

| Debtor 1 | Debtor 2 |
|--|--|
| Sources of income Describe below. | Sources of income Describe below. |
| Gross income from each source (before deductions and exclusions) | Gross income (before deductions and exclusions) |
| | |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

- ☐ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.
☒ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for ... |
|---|---|-------------------|----------------------|---|
| Toyota Financial Services 19001 S. Western Avenue Torrance, CA 90501 | Within 90 days prior to filing | \$2,100.00 | \$8,000.00 | <input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other___ |

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

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| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for ... |
|---|---|-------------------|----------------------|--|
| Daniel Mangra 5813 Silk Tree Drive Riverdale, MD 20737 | Within 90 days prior to filing | Unknown | Unknown | <input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Childcare</u> |
| AT&T Wireless c/o Bankruptcy 4331 Communication Drive, Flr 4W Dallas, TX 75211 | Within 90 days prior to filing | \$840.00 | \$0.00 | <input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Utility</u> |
| Farmers Insurance Group 6301 Owensmouth Avenue Woodland Hills, CA 91367 | Within 90 days prior to filing | \$798.50 | \$0.00 | <input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other ____ |
| MedChi Insurance Agency 1204 Maryland Avenue Baltimore, MD 21201 | Within 90 days prior to filing | \$1,266.86 | Unknown | <input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other <u>Malpractice Insurance</u> |

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☐ No
☒ Yes. List all payments to an insider.

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|--|---|-------------------|----------------------|-------------------------|
| Daniel Mangra 5813 Silktree Drive Riverdale, MD 20737 | 1 year prior to filing | \$3,000.00 | \$12,000.00 | Loan repayment |

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments to an insider

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
|----------------------------|------------------|-------------------|----------------------|--|
|----------------------------|------------------|-------------------|----------------------|--|

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
☒ Yes. Fill in the details.

| Case title Case number | Nature of the case | Court or agency | Status of the case |
|---|-------------------------|--|---|
| Greenway East Professional Center v. Divya Verma 050200350762018 | Civil | District Court for PG County 14735 Main Street Upper Marlboro, MD 20772 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| Martin Gozman, et al. v. Divya Verma, et al. C08CV17000401 | Foreclosure | Circuit Court for Charles County 200 Charles Street La Plata, MD 20646 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Exceptions to Sale Granted; Report of Sale Stricken |
| O'Sullivan, Brady etc. v. Divya Verma CAEF18-14025 | Foreclosure | Circuit Court for Prince George's County 14735 Main Street Upper Marlboro, MD 20772 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Sale Ratified 11/8/18 |
| WBGLMC v. Divya Verma, et ux. CAEF18-34103 | Foreclosure | Circuit Court for Prince George's County 14735 Main Street Upper Marlboro, MD 20772 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| Bankers Healthcare Group, LLC v. Divya Verma et al. CAL18-00306 | Foreign Judgment | Circuit Court for Prince George's County 14735 Main Street Upper Marlboro, MD 20772 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded Judgment entered 2/6/18 |
| BSPLLC v. Lolita Mangra, et al. CAEF18-32402 | Foreclosure | Circuit Court for Prince George's County 14735 Main Street Upper Marlboro, MD 20772 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| Greenway East Professional Center v. Verma 050200149962017 | Civil | District Court for PG County 14735 Main Street Upper Marlboro, MD 20772 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
 Check all that apply and fill in the details below.

- ☐ No. Go to line 11.
☒ Yes. Fill in the information below.

| Creditor Name and Address | Describe the Property Explain what happened | Date | Value of the property |
|---------------------------|--|------|-----------------------|
|---------------------------|--|------|-----------------------|

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

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| Creditor Name and Address | Describe the Property | Date | Value of the property |
|--|--|-------------|-----------------------|
| Greenway East Professional Center c/o Kathleen M. Elmore PO Box 1473 Severna Park, MD 21146 | Bank Account <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input checked="" type="checkbox"/> Property was attached, seized or levied. | 3/19 | \$300.00 |

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

| Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
|---------------------------|---------------------------------------|-----------------------|--------|
|---------------------------|---------------------------------------|-----------------------|--------|

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
|--|--------------------|--------------------------|-------|
| Person to Whom You Gave the Gift and Address: | | | |

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☐ No
☒ Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Dates you contributed | Value |
|--|---|-------------------------|-------------------|
| Charity's Name Address (Number, Street, City, State and ZIP Code) | | | |
| Big Brothers/Big Sisters 7401 Forbes Boulevard, Suite B2 Lanham, MD 20706 | Household goods, furniture, toys, clothing | Previous 2 years | \$2,100.00 |

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☐ No
☒ Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
|--|---|----------------------|------------------------|
| Gambling Losses | N/A Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Previous year | \$1,500.00 |

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

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Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

| Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--|---|-----------------------------------|-------------------|
| The Weiss Law Group, LLC 6404 Ivy Lane, Suite 650 Greenbelt, MD 20770 brett@BankruptcyLawMaryland.com | Attorney Fees | | \$20,000.00 |
| Evergreen Financial Counseling P.O. Box 3801 Salem, OR 97302 | Credit Counseling | | \$40.00 |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☐ No
☒ Yes. Fill in the details.

| Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--|---|-----------------------------------|-------------------|
| Lendmark Financial Services 2080 Crain Hwy Waldorf, MD 20601 | | 2017-18 | \$2,500.00 |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☐ No
☒ Yes. Fill in the details.

| Person Who Received Transfer Address Person's relationship to you | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|---|---|--|------------------------|
| GoldenEagle.com | Coins--\$16,650.00 | Funds used to pay retainer to bankruptcy counsel | 4/19 |
| None | | | |

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

| Name of trust | Description and value of the property transferred | Date Transfer was made |
|---------------|---|------------------------|
|---------------|---|------------------------|

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

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Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
 Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☒ No

☐ Yes. Fill in the details.

| Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|--|---------------------------------|-------------------------------|--|---|
|--|---------------------------------|-------------------------------|--|---|

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☐ No

☒ Yes. Fill in the details.

| Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|--|---|-------------------------------------|--|
| Suntrust Bank 303 Peachtree St, N.E. Atlanta, GA 30308 | Debtors | Coins, value approximately \$100.00 | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes |

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No

☐ Yes. Fill in the details.

| Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|---|--|-----------------------|-----------------------|
|---|--|-----------------------|-----------------------|

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☒ No

☐ Yes. Fill in the details.

| Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
|---|---|-----------------------|-------|
|---|---|-----------------------|-------|

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ☒ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☒ **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☒ **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

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24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
|--|---|-----------------------------------|----------------|
|--|---|-----------------------------------|----------------|

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
|--|---|-----------------------------------|----------------|
|--|---|-----------------------------------|----------------|

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

| Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
|---------------------------|---|--------------------|--------------------|
|---------------------------|---|--------------------|--------------------|

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☒ An officer, director, or managing executive of a corporation
☒ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

| Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. Dates business existed |
|--|---|--|
| Metrohealthcare, PC 1100 Mercantile Lane, Suite 135 Upper Marlboro, MD 20774 | Healthcare | EIN: 52-2248557 From-To 2000 to present |
| Trinity Lake Center, LLC 9800 Ashburton Lane Bethesda, MD 20817 | Real Estate | EIN: From-To 2005 to present |

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
☐ Yes. Fill in the details below.

| Name Address (Number, Street, City, State and ZIP Code) | Date Issued |
|---|-------------|
|---|-------------|

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Divya Verma

Divya Verma
 Signature of Debtor 1

/s/ Lolita Doodhauth Verma

Lolita Doodhauth Verma
 Signature of Debtor 2

Date May 8, 2019

Date May 8, 2019

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

| | | | |
|---|-------------------------------|-------------|-----------|
| Debtor 1 | Divya Verma | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Lolita Doodhauth Verma | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | DISTRICT OF MARYLAND | | |
| Case number (if known) | 19-14883 | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

| | | Your assets Value of what you own |
|-----|---|--------------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) | |
| 1a. | Copy line 55, Total real estate, from Schedule A/B..... | \$ 1,374,721.00 |
| 1b. | Copy line 62, Total personal property, from Schedule A/B..... | \$ 328,303.18 |
| 1c. | Copy line 63, Total of all property on Schedule A/B..... | \$ 1,703,024.18 |

Part 2: Summarize Your Liabilities

| | | Your liabilities Amount you owe |
|-------------------------------|---|------------------------------------|
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | |
| 2a. | Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ... | \$ 2,132,562.63 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | |
| 3a. | Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | \$ 44,302.00 |
| 3b. | Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | \$ 224,121.70 |
| Your total liabilities | | \$ 2,400,986.33 |

Part 3: Summarize Your Income and Expenses

| | | |
|----|--|---------------------|
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of <i>Schedule I</i> | \$ 15,726.62 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of <i>Schedule J</i> | \$ 15,465.00 |

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☒ Yes

7. What kind of debt do you have?

☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

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8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **11,076.54**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

| | Total claim |
|--|---------------------|
| From Part 4 on Schedule E/F, copy the following: | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ 44,302.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ 44,302.00 |

Fill in this information to identify your case and this filing:

| | | | |
|---|-------------------------------|-------------|-----------|
| Debtor 1 | Divya Verma | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Lolita Doodhauth Verma | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: <u>DISTRICT OF MARYLAND</u> | | | |
| Case number | <u>19-14883</u> | | |

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

3306 Waterford Mill Road

Street address, if available, or other description

| | | |
|--------------|-----------|-------------------|
| Bowie | MD | 20721-0000 |
| City | State | ZIP Code |

Prince Georges

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$1,234,454.00

Current value of the portion you own?

\$1,234,454.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Tenancy by the Entireties

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

Value per zillow.com

(Property was previously designated as 12807 Contee Manor Road, Bowie, MD 20721)

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

If you own or have more than one, list here:

1.2

4905 Brookwood Road

Street address, if available, or other description

Brooklyn MD 21225-0000

City State ZIP Code

Anne Arundel

County

What is the property? Check all that apply

- ☐ Single-family home
☒ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another _____

Other information you wish to add about this item, such as local property identification number:

Value per zillow.com

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$135,767.00

Current value of the portion you own?

\$135,767.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.3

7525 Greenway Center Drive Unit 202

Street address, if available, or other description

Greenbelt MD 20770-0000

City State ZIP Code

Prince Georges

County

What is the property? Check all that apply

- ☐ Single-family home
☐ Duplex or multi-unit building
☒ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another _____

Other information you wish to add about this item, such as local property identification number:

Titling is questionable at this point; a deed in lieu of foreclosure was signed, but never recorded.

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Unknown

Current value of the portion you own?

Unknown

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

If you own or have more than one, list here:

1.4

Unit 16, Block 231.6

Street address, if available, or other description

Ocala FL 34478-0000

City State ZIP Code

Marion

County

What is the property? Check all that apply

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another _____

Other information you wish to add about this item, such as local property identification number:

Value per 2018 Assessment

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$4,500.00

Current value of the portion you own?

\$4,500.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.5

5813 Silk Tree Drive

Street address, if available, or other description

Riverdale MD 20737-0000

City State ZIP Code

Prince Georges

County

What is the property? Check all that apply

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another _____

Other information you wish to add about this item, such as local property identification number:

Debtor is not on DOT Note

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Unknown

Current value of the portion you own?

Unknown

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Joint Tenant with Daniel & Barbara Mangra, tenants by the entireties

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$1,374,721.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

☐ No
☒ Yes

3.1 Make: **Nissan**
 Model: **Pathfinder**
 Year: **2012**
 Approximate mileage: **62526**
 Other information:
Value per kbb.com

Who has an interest in the property? Check one

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$9,048.00

\$9,048.00

3.2 Make: **Toyota**
 Model: **Sienna**
 Year: **2014**
 Approximate mileage: **64786**
 Other information:
Value per kbb.com

Who has an interest in the property? Check one

☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$12,397.00

\$12,397.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No
☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$21,445.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No
☒ Yes. Describe.....

Household goods and furnishings, appliances, furniture, linens, china, kitchenware, etc.

\$6,000.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No
☒ Yes. Describe.....

Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games, etc.

\$1,450.00

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe.....

Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles, etc.

\$650.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.....

Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

\$1,500.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☐ No

☒ Yes. Describe.....

Firearms

\$1,075.00

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Clothing and wearing apparel, outerwear, furs, leather coats, designer wear, shoes, accessories

\$700.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

Costume jewelry, rings, necklaces, earrings, bracelets, brooches, watches, gemstones, gold, silver

\$3,750.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$15,125.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

portion you own?
 Do not deduct secured
 claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes.....

Cash

\$2,000.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes.....

Institution name:

17.1. **Checking xxx3396** **Suntrust** **\$7.54**

17.2. **Checking xxx3768** **Suntrust**
Listed solely for disclosure purposes;
account is in the name of Metrohealthcare
and the debtor has signature authority. **Unknown**

17.3. **Checking xxx3850** **Agriculture FCU** **\$897.25**

17.4. **Savings xxx3850** **Agriculture FCU** **\$0.00**

17.5. **Checking xxx3550** **BB&T** **\$8.21**

17.6. **Gold Holdings**
1.586g--Valued as
of 4/10/19 at
\$42.07/g **Goldmoney** **\$66.72**

17.7. **Checking xxx7112** **Old Line Bank** **\$107.27**

17.8. **Checking xxx7706** **Suntrust**
Listed solely for disclosure purposes;
account is in the name of Trinity Lake LLC e
and the debtor has signature authority. **\$70.00**

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☐ No

☒ Yes.....

Institution or issuer name:

E*Trade: **\$1,445.62**

SunTrust **\$24.58**

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☐ No

☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Trinity Lake Center, LLC

100 %

\$0.00

Metro Health Care, PC

100 %

Unknown

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account:

Institution name:

IRA

Ameritrade

\$13.96

IRA

The Entrust Group

\$202,020.58

IRA

The Entrust Group

\$12,500.00

TSP

Government Pension

\$50,000.00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☐ No

☒ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

The Entrust Group (for Child 1)

\$2,659.83

The Entrust Group (for Child 2)

\$2,564.82

The Entrust Group (for Child 3)

\$1,217.70

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

☐ No

☒ Yes. Give specific information..

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

Coins (American silver eagles), net weight 1,000 oz. (92.5% silver=843.09896 oz pure silver) valued as of 4/10/19 @ \$15.20/oz pure silver

\$12,815.10

lode.com (cryptocurrency)

\$3,314.00

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$291,733.18

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

| | | |
|--|---------------------|--|
| 55. Part 1: Total real estate, line 2 | | \$1,374,721.00 |
| 56. Part 2: Total vehicles, line 5 | \$21,445.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$15,125.00 | |
| 58. Part 4: Total financial assets, line 36 | \$291,733.18 | |
| 59. Part 5: Total business-related property, line 45 | \$0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | |
| 61. Part 7: Total other property not listed, line 54 | \$0.00 | |
| 62. Total personal property. Add lines 56 through 61... | \$328,303.18 | Copy personal property total \$328,303.18 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$1,703,024.18 |

Fill in this information to identify your case:

| | | | |
|---|-------------------------------|-------------|-----------|
| Debtor 1 | Divya Verma | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Lolita Doodhauth Verma | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | DISTRICT OF MARYLAND | | |
| Case number | 19-14883 | | |
| (if known) | | | |

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small> | Amount of the exemption you claim <small>Check only one box for each exemption.</small> | Specific laws that allow exemption |
|---|--|---|--|
| Household goods and furnishings, appliances, furniture, linens, china, kitchenware, etc. Line from <i>Schedule A/B</i> : 6.1 | \$6,000.00 | <input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4) |
| Costume jewelry, rings, necklaces, earrings, bracelets, brooches, watches, gemstones, gold, silver Line from <i>Schedule A/B</i> : 12.1 | \$3,750.00 | <input checked="" type="checkbox"/> \$3,750.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| Cash Line from <i>Schedule A/B</i> : 16.1 | \$2,000.00 | <input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| Checking xxx3396: Suntrust Line from <i>Schedule A/B</i> : 17.1 | \$7.54 | <input checked="" type="checkbox"/> \$7.54 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| Checking xxx3850: Agriculture FCU Line from <i>Schedule A/B</i> : 17.3 | \$897.25 | <input checked="" type="checkbox"/> \$1,036.41 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own <small>Copy the value from Schedule A/B</small> | Amount of the exemption you claim <small>Check only one box for each exemption.</small> | Specific laws that allow exemption |
|---|---|---|--|
| Checking xxx3550: BB&T Line from Schedule A/B: 17.5 | \$8.21 | <input checked="" type="checkbox"/> \$8.21 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| Gold Holdings 1.586g--Valued as of 4/10/19 at \$42.07/g: Goldmoney Line from Schedule A/B: 17.6 | \$66.72 | <input checked="" type="checkbox"/> \$66.72 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| Checking xxx7112: Old Line Bank Line from Schedule A/B: 17.7 | \$107.27 | <input checked="" type="checkbox"/> \$107.27 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| E*Trade: Line from Schedule A/B: 18.1 | \$1,445.62 | <input checked="" type="checkbox"/> \$1,445.62 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| SunTrust Line from Schedule A/B: 18.2 | \$24.58 | <input checked="" type="checkbox"/> \$24.58 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| IRA: Ameritrade Line from Schedule A/B: 21.1 | \$13.96 | <input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(h) |
| IRA: The Entrust Group Line from Schedule A/B: 21.2 | \$202,020.58 | <input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(h) |
| IRA: The Entrust Group Line from Schedule A/B: 21.3 | \$12,500.00 | <input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(h) |
| TSP: Government Pension Line from Schedule A/B: 21.4 | \$50,000.00 | <input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(h) |
| Coins (American silver eagles), net weight 1,000 oz. (92.5% silver=843.09896 oz pure silver) valued as of 4/10/19 @ \$15.20/oz pure silver Line from Schedule A/B: 35.1 | \$12,815.10 | <input checked="" type="checkbox"/> \$8,686.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5) |
| lode.com (cryptocurrency) Line from Schedule A/B: 35.2 | \$3,314.00 | <input checked="" type="checkbox"/> \$3,314.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5) |

Debtor 1 **Divya Verma**
Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

3. **Are you claiming a homestead exemption of more than \$170,350?**
(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)
- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Fill in this information to identify your case:

| | | | |
|---|-------------------------------|-------------|-----------|
| Debtor 1 | Divya Verma | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Lolita Doodhauth Verma | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: <u>DISTRICT OF MARYLAND</u> | | | |
| Case number | 19-14883 | | |
| (if known) | | | |

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

| Column A | Column B | Column C |
|---|--|-----------------------------|
| Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| \$6,657.60 | \$0.00 | \$6,657.60 |

2.1 **Greenway East Professional Center**

Creditor's Name

**c/o Kathleen M. Elmore
PO Box 1473
Severna Park, MD 21146**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

Unknown

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☒ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

Debtor 1 **Divya Verma**Case number (if known) **19-14883**

First Name Middle Name Last Name

Debtor 2 **Lolita Doodhauth Verma**

First Name Middle Name Last Name

2.2 Internal Revenue Service

Creditor's Name

**Centralized Insolvency
Operation
PO Box 7346
Philadelphia, PA
19101-7346**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$185,485.08**\$1,234,454.00****\$185,485.08**

**3306 Waterford Mill Road Bowie, MD
20721 Prince Georges County
Value per zillow.com
(Property was previously
designated as 12807 Contee Manor
Road, Bowie, MD 20721)**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)☒ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

2.3 Marion County, Florida

Creditor's Name

**George Albright, Tax
Collector
PO Box 970
Ocala, FL 34478**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$121.50**\$4,500.00****\$0.00**

**Unit 16, Block 231.6 Ocala, FL 34478
Marion County
Value per 2018 Assessment**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)☒ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number **2014**

Debtor 1 **Divya Verma**Case number (if known) **19-14883**

First Name Middle Name Last Name

Debtor 2 **Lolita Doodhauth Verma**

First Name Middle Name Last Name

2.4 Mr. Cooper

Creditor's Name

**PO Box 619098
Dallas, TX 75261**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$82,304.03**\$135,767.00****\$0.00****4905 Brookwood Road Brooklyn,
MD 21225 Anne Arundel County
Value per zillow.com**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **8632****2.5 Mr. Cooper**

Creditor's Name

**PO Box 619098
Dallas, TX 75261**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$18,982.12**\$135,767.00****\$0.00****4905 Brookwood Road Brooklyn,
MD 21225 Anne Arundel County
Value per zillow.com**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **4123**

Debtor 1 **Divya Verma**Case number (if known) **19-14883**

First Name Middle Name Last Name

Debtor 2 **Lolita Doodhauth Verma**

First Name Middle Name Last Name

2.6 Prince George's County

Creditor's Name

**c/o Meyers, Rodbell &
Rosenbaum, PA
6801 Kenilworth Avenue,
Suite 400
Riverdale, MD 20737**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$13,877.73**\$1,234,454.00****\$13,877.73**

**3306 Waterford Mill Road Bowie, MD
20721 Prince Georges County
Value per zillow.com
(Property was previously
designated as 12807 Contee Manor
Road, Bowie, MD 20721)**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☒ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

2.7 Prince George's County

Creditor's Name

**c/o Meyers, Rodbell &
Rosenbaum, PA
6801 Kenilworth Avenue,
Suite 400
Riverdale, MD 20737**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$7,157.77**Unknown****Unknown**

**5813 Silk Tree Drive Riverdale, MD
20737 Prince Georges County
Debtor is not on DOT Note**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☒ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

Debtor 1 **Divya Verma**Case number (if known) **19-14883**

First Name Middle Name Last Name

Debtor 2 **Lolita Doodhauth Verma**

First Name Middle Name Last Name

2.8 Rushmore Loan Management

Creditor's Name

**P.O. Box 52708
Irvine, CA 92619**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$1,250,000.00**\$1,234,454.00****\$15,546.00****3306 Waterford Mill Road Bowie, MD
20721 Prince Georges County
Value per zillow.com
(Property was previously
designated as 12807 Contee Manor
Road, Bowie, MD 20721)**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **1482****2.9 State of Maryland**

Creditor's Name

**Comptroller of the
Currency
Compliance Division,
Room 409
301 West Preston Street
Baltimore, MD 21201**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$23,682.81**\$1,234,454.00****\$23,682.81****3306 Waterford Mill Road Bowie, MD
20721 Prince Georges County
Value per zillow.com
(Property was previously
designated as 12807 Contee Manor
Road, Bowie, MD 20721)**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)☒ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **4269**

Debtor 1 **Divya Verma**Case number (if known) **19-14883**

First Name Middle Name Last Name

Debtor 2 **Lolita Doodhauth Verma**

First Name Middle Name Last Name

2.1
0**SunTrust Mortgage**

Creditor's Name

**PO Box 85526
Richmond, VA 23285**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Describe the property that secures the claim:

**5813 Silk Tree Drive Riverdale, MD
20737 Prince Georges County
Debtor is not on DOT Note**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

\$509,071.00**Unknown****Unknown**

Date debt was incurred

Last 4 digits of account number **8904**2.1
1**SunTrust Mortgage**

Creditor's Name

**PO Box 85526
Richmond, VA 23285**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Describe the property that secures the claim:

**5813 Silk Tree Drive Riverdale, MD
20737 Prince Georges County
Debtor is not on DOT Note**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

\$25,375.00**Unknown****Unknown**

Date debt was incurred

Last 4 digits of account number **1372**

Debtor 1 **Divya Verma**Case number (if known) **19-14883**

First Name Middle Name Last Name

Debtor 2 **Lolita Doodhauth Verma**

First Name Middle Name Last Name

2.1 **Toyota Financial**
2 **Services**

Creditor's Name

Describe the property that secures the claim:

\$9,847.99**\$12,397.00****\$0.00****2014 Toyota Sienna 64786 miles**
Value per kbb.com**19001 S. Western Avenue**
Torrance, CA 90501

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____

Who owes the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number **6926**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$2,132,562.63

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$2,132,562.63**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.



Name, Number, Street, City, State & Zip Code

BWW Law Group, LLC**6003 Executive Blvd., Suite 101****Rockville, MD 20852**On which line in Part 1 did you enter the creditor? **2.8**

Last 4 digits of account number _____

Fill in this information to identify your case:

| | | | |
|---|-------------------------------|-------------|-----------|
| Debtor 1 | Divya Verma | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Lolita Doodhauth Verma | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | DISTRICT OF MARYLAND | | |
| Case number | 19-14883 | | |
| (if known) | | | |

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**
☐ No. Go to Part 2.

☒ Yes.
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| | | Total claim | Priority amount | Nonpriority amount |
|-----|--|--|-----------------|--------------------|
| 2.1 | Internal Revenue Service Priority Creditor's Name Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code | Last 4 digits of account number 4269 | Unknown | Unknown |
| | Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ | Unknown | Unknown |
| | | Income Taxes | | |

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

| | | | | | |
|-----|--|--|--------------------|--------------------|---------------|
| 2.2 | State of Maryland Priority Creditor's Name Comptroller of the Currency Compliance Division, Room 409 301 West Preston Street Baltimore, MD 21201 Number Street City State Zip Code | Last 4 digits of account number 4269 | \$44,302.00 | \$44,302.00 | \$0.00 |
| | Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ Income Taxes | | | |

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

| | | | | |
|-----|--|---|-------------------|--------------------|
| 4.1 | Bankers Healthcare Group Nonpriority Creditor's Name 201 Solar Street Syracuse, NY 13204 Number Street City State Zip Code | Last 4 digits of account number 5185 | \$7,610.69 | Total claim |
| | Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card | | |

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

| | | | |
|-----|---|--|--------------------|
| 4.2 | Bankers Healthcare Group Nonpriority Creditor's Name 201 Solar Street Syracuse, NY 13204 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number 6049 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card | \$10,841.06 |
|-----|---|--|--------------------|

| | | | |
|-----|--|---|-------------------|
| 4.3 | Berlin Ramos CPA Nonpriority Creditor's Name 11200 Rockville Pike, #400 Rockville, MD 20852 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number 1700 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Accounting Services | \$9,120.06 |
|-----|--|---|-------------------|

| | | | |
|-----|--|---|-----------------|
| 4.4 | CAO-Potomac Valley Orthopaedics Nonpriority Creditor's Name PO Box 99 Olney, MD 20830 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number 6771 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Medical Goods and/or Services | \$347.87 |
|-----|--|---|-----------------|

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

| | | |
|-----|---|---|
| 4.5 | Capital One Nonpriority Creditor's Name ATTN: BANKRUPTCY / LEGAL DEPT PO Box 85167 Richmond, VA 23285-5167 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number 2386 \$2,829.91 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card |
| 4.6 | Chase Bank USA Nonpriority Creditor's Name Card Services PO Box 15298 Wilmington, DE 19850-5298 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number 5111 \$8,659.05 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card |
| 4.7 | Chase Card Services Nonpriority Creditor's Name PO Box 15298 Wilmington, DE 19850-5298 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number 3878 \$8,659.05 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card |

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

| | | | |
|-----|--|--|--------------------|
| 4.8 | Citibank N.A. Nonpriority Creditor's Name PO Box 6500 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number <u>6896</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u> | \$13,056.13 |
|-----|--|--|--------------------|

| | | | |
|-----|---|---|-----------------|
| 4.9 | Community Radiology Assoc. Nonpriority Creditor's Name P.O. Box 64939 Baltimore, MD 21264-4939 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number <u>6976</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Goods and/or Services</u> | \$315.00 |
|-----|---|---|-----------------|

| | | | |
|----------|---|---|--------------------|
| 4.1 0 | Daniel Mangra Nonpriority Creditor's Name 5813 Silk Tree Drive Riverdale, MD 20737 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Loan</u> | \$12,000.00 |
|----------|---|---|--------------------|

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

4.1
1

David Durante

Nonpriority Creditor's Name

**555 Hall Court
 Havre De Grace, MD 21078**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **693**

\$2,424.28

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Computer Goods and/or Services**

4.1
2

DCH Answering SVC

Nonpriority Creditor's Name

**7404 Executive Place #300B
 Lanham, MD 20706**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1116**

\$4,258.18

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Answering Service**

4.1
3

Farmers Insurance Group

Nonpriority Creditor's Name

**6301 Owensmouth Avenue
 Woodland Hills, CA 91367**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9443**

\$841.99

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Insurance**

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

4.1
4

First Citizen Bank

Nonpriority Creditor's Name

**239 Fayetteville Street
Raleigh, NC 27601**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

\$16,357.11

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Balance after foreclosure**

4.1
5

First Citizens Bank & Trust Company

Nonpriority Creditor's Name

**Attn: Bankruptcy Department
PO Box 25187
Raleigh, NC 27611-5187**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

3696

\$4,991.48

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.1
6

Funding Circle USA, Inc.

Nonpriority Creditor's Name

**c/o Cohn & Dussi, LLC
68 Harrison Avenue, Suite 502
Boston, MA 02111**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

3905

\$66,696.72

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Business Loan**

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

4.1
7

Holy Cross Hospital

Nonpriority Creditor's Name

**1500 Forest Glen Rd
 Silver Spring, MD 20910-1483**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **6208**

\$1,165.79

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Medical Goods and/or Services**

4.1
8

Home Depot Credit Services

Nonpriority Creditor's Name

**Citicard Private Label
 PO Box 20483
 Kansas City, MO 64195-0483**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0605**

\$446.72

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.1
9

Macy's

Nonpriority Creditor's Name

**Bankruptcy Processing
 P.O. Box 8053
 Mason, OH 45040**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0600**

\$300.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

4.2
0

Marlin Business Bank

Nonpriority Creditor's Name

**300 Fellowship Road
 Mount Laurel, NJ 08054**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5001**

\$4,187.63

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Loan**

4.2
1

Nationwide Insurance

Nonpriority Creditor's Name

**1 W Nationwide Blvd
 Columbus, OH 43215-2226**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0396**

\$483.96

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Insurance**

4.2
2

Navy FCU

Nonpriority Creditor's Name

**PO Box 3302
 Merrifield, VA 22119-3302**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5149**

\$23,686.59

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

4.2
3

Neiman-Marcus

Nonpriority Creditor's Name

**PO Box 729080
 Dallas, TX 75372**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **3916**

\$7,500.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.2
4

PEPCO

Nonpriority Creditor's Name

**PO Box 97274
 Washington, DC 20067-2812**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **8813**

\$1,302.07

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Utility**

4.2
5

Saks Fifth Avenue

Nonpriority Creditor's Name

**3455 Hwy 80
 Jackson, MS 39209**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **9983**

\$3,878.41

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

4.2
6

Suntrust Bank

Nonpriority Creditor's Name

**303 Peachtree St, N.E.
Atlanta, GA 30308**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **4337**

\$3,376.65

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.2
7

Suntrust Bank

Nonpriority Creditor's Name

**303 Peachtree St, N.E.
Atlanta, GA 30308**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0568**

\$4,785.30

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.2
8

Target National Bank

Nonpriority Creditor's Name

**PO Box 673
Minneapolis, MN 55440-0673**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **8411**

\$4,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

Name and Address
Advanced Recovery Systems
PO Box 80766
Valley Forge, PA 19484

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital Collection Management
115 Solar Street, #100
Syracuse, NY 13204

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital Collection Management
115 Solar Street, #100
Syracuse, NY 13204

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Credit Collection Services
2 Wells Ave
Newton, MA 02459-3210

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Credit Collection Services
2 Wells Ave
Newton, MA 02459-3210

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.13** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
JP Recovery
PO Box 16749
Rocky River, OH 44116-0749

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
McCabe, Weisberg & Conway LLC
312 Marshall Ave Suite 800
Laurel, MD 20707

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
McCarthy, Burgess & Wolff
26000 Cannon Rd.
Bedford, OH 44146

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Nationwide Credit, Inc.
PO Box 14581
Des Moines, IA 50306

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Radius Global Solutions
PO Box 390905
Minneapolis, MN 55439

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| Total claims from Part 1 | | | Total Claim | |
|--------------------------|--|-----|-------------|------------------|
| | | | | |
| 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 44,302.00 |

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

| | | |
|--------------------------------|--|--------------------------|
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. \$ <u>0.00</u> |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. \$ <u>0.00</u> |
| | 6e. Total Priority. Add lines 6a through 6d. | 6e. \$ <u>44,302.00</u> |
| Total claims from Part 2 | 6f. Student loans | 6f. \$ <u>0.00</u> |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. \$ <u>0.00</u> |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. \$ <u>0.00</u> |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. \$ <u>224,121.70</u> |
| | 6j. Total Nonpriority. Add lines 6f through 6i. | 6j. \$ <u>224,121.70</u> |

Fill in this information to identify your case:

| | | | |
|---|-------------------------------|-------------|-----------|
| Debtor 1 | Divya Verma | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Lolita Doodhauth Verma | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | DISTRICT OF MARYLAND | | |
| Case number | 19-14883 | | |
| (if known) | | | |

☐ Check if this is an amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. **Do you have any executory contracts or unexpired leases?**

☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. **List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|--|---|
| 2.1 | Bonnie Williams 4905 Brookwood Road, Apt. A Brooklyn, MD 21225 | Residential Lease |
| 2.2 | Reynolds Team 14399 Penrose Place, #300 Chantilly, VA 20151 | Listing Agreement |
| 2.3 | Shirley Herbert 4905 Brookwood Road, #2 Brooklyn, MD 21225 | Residential Lease |

Fill in this information to identify your case:

| | | | |
|---|-------------------------------|-------------|-----------|
| Debtor 1 | Divya Verma | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | Lolita Doodhauth Verma | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | DISTRICT OF MARYLAND | | |
| Case number (if known) | 19-14883 | | |

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No

☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 **Daniel & Barbara Mangra**
5813 Silk Tree Drive
Riverdale, MD 20737

☒ Schedule D, line **2.10**
☐ Schedule E/F, line _____
☐ Schedule G _____
SunTrust Mortgage

3.2 **Daniel & Barbara Mangra**
5813 Silk Tree Drive
Riverdale, MD 20737

☒ Schedule D, line **2.11**
☐ Schedule E/F, line _____
☐ Schedule G _____
SunTrust Mortgage

3.3 **Metro Health Care, PC**
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

☐ Schedule D, line _____
☒ Schedule E/F, line **4.16**
☐ Schedule G _____
Funding Circle USA, Inc.

Debtor 1 **Divya Verma**
Lolita Doodhauth Verma

Case number (if known) **19-14883**

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: **The creditor to whom you owe the debt**
 Check all schedules that apply:

3.4 **Metro Health Care, PC**
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

☐ Schedule D, line _____
☒ Schedule E/F, line **4.12**
☐ Schedule G _____
DCH Answering SVC

3.5 **Metro Health Care, PC**
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

☐ Schedule D, line _____
☒ Schedule E/F, line **4.24**
☐ Schedule G _____
PEPCO

3.6 **Metro Health Care, PC**
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

☐ Schedule D, line _____
☒ Schedule E/F, line **4.1**
☐ Schedule G _____
Bankers Healthcare Group

3.7 **Metro Health Care, PC**
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

☐ Schedule D, line _____
☒ Schedule E/F, line **4.2**
☐ Schedule G _____
Bankers Healthcare Group

3.8 **Metro Health Care, PC**
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

☐ Schedule D, line _____
☒ Schedule E/F, line **4.3**
☐ Schedule G _____
Berlin Ramos CPA

3.9 **Metro Health Care, PC**
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

☐ Schedule D, line _____
☒ Schedule E/F, line **4.11**
☐ Schedule G _____
David Durante

3.10 **Metro Health Care, PC**
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

☐ Schedule D, line _____
☒ Schedule E/F, line **4.20**
☐ Schedule G _____
Marlin Business Bank

Fill in this information to identify your case:

Debtor 1 Divya Verma

Debtor 2 Lolita Doodhauth Verma
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number 19-14883
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

| | | Debtor 1 | Debtor 2 or non-filing spouse |
|---|--------------------------|---|---|
| 1. Fill in your employment information. | Employment status | <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed | <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed |
| | Occupation | <u>Physician</u> | <u>Management Assistant</u> |
| If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. | Employer's name | <u>Metro Health Care, PC</u> | <u>USDA ARS</u> |
| | Employer's address | <u>1100 Mercantile Lane, Suite 1355 Upper Marlboro, MD 20774</u> | <u>PO Box 60000 New Orleans, LA 70160</u> |
| Occupation may include student or homemaker, if it applies. | How long employed there? | <u>1999 to present</u> | |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|--|-----------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | \$ <u>0.00</u> | \$ <u>5,759.87</u> |
| 3. Estimate and list monthly overtime pay. | +\$ <u>0.00</u> | +\$ <u>0.00</u> |
| 4. Calculate gross income. Add line 2 + line 3. | \$ <u>0.00</u> | \$ <u>5,759.87</u> |

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|--|--|-----------------------------------|
| Copy line 4 here | 4. \$ 0.00 | \$ 5,759.87 |
| 5. List all payroll deductions: | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. \$ 0.00 | \$ 659.95 |
| 5b. Mandatory contributions for retirement plans | 5b. \$ 0.00 | \$ 46.09 |
| 5c. Voluntary contributions for retirement plans | 5c. \$ 0.00 | \$ 287.99 |
| 5d. Required repayments of retirement fund loans | 5d. \$ 0.00 | \$ 0.00 |
| 5e. Insurance | 5e. \$ 0.00 | \$ 493.22 |
| 5f. Domestic support obligations | 5f. \$ 0.00 | \$ 0.00 |
| 5g. Union dues | 5g. \$ 0.00 | \$ 0.00 |
| 5h. Other deductions. Specify: | 5h.+ \$ 0.00 | + \$ 0.00 |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. \$ 0.00 | \$ 1,487.25 |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. \$ 0.00 | \$ 4,272.62 |
| 8. List all other income regularly received: | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. \$ 0.00 | \$ 1,454.00 |
| 8b. Interest and dividends | 8b. \$ 0.00 | \$ 0.00 |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. \$ 0.00 | \$ 0.00 |
| 8d. Unemployment compensation | 8d. \$ 0.00 | \$ 0.00 |
| 8e. Social Security | 8e. \$ 0.00 | \$ 0.00 |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. \$ 0.00 | \$ 0.00 |
| 8g. Pension or retirement income | 8g. \$ 0.00 | \$ 0.00 |
| 8h. Other monthly income. Specify: Approx. Net Income from Practice | 8h.+ \$ 10,000.00 | + \$ 0.00 |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. \$ 10,000.00 | \$ 1,454.00 |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ 10,000.00 + \$ 5,726.62 | = \$ 15,726.62 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: | | |
| | 11. +\$ | 0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies | 12. \$ | 15,726.62 |
| 13. Do you expect an increase or decrease within the year after you file this form? | | |
| <input checked="" type="checkbox"/> No. | | |
| <input type="checkbox"/> Yes. Explain: | | |

Combined monthly income

Fill in this information to identify your case:

Debtor 1 Divya Verma

Debtor 2 Lolita Doodhauth Verma
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number 19-14883
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.☒ Yes. Does Debtor 2 live in a separate household?☒ No☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

3

☐ No☒ Yes

Son

4

☐ No☒ Yes

Son

8

☐ No☒ Yes

Son

9

☐ No☒ Yes3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 4,500.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 750.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 733.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 100.00

4d. Homeowner's association or condominium dues

4d. \$ 100.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

6. Utilities:

| | | |
|--|--------|---------------|
| 6a. Electricity, heat, natural gas | 6a. \$ | <u>300.00</u> |
| 6b. Water, sewer, garbage collection | 6b. \$ | <u>75.00</u> |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | <u>500.00</u> |
| 6d. Other. Specify: <u>Security</u> | 6d. \$ | <u>15.00</u> |
| <u>Solar</u> | \$ | <u>200.00</u> |

7. Food and housekeeping supplies

7. \$ 1,800.00

8. Childcare and children's education costs

8. \$ 1,200.00

9. Clothing, laundry, and dry cleaning

9. \$ 200.00

10. Personal care products and services

10. \$ 150.00

11. Medical and dental expenses

11. \$ 250.00

12. Transportation. Include gas, maintenance, bus or train fare.

Do not include car payments.

12. \$ 350.00

13. Entertainment, clubs, recreation, newspapers, magazines, and books

13. \$ 200.00

14. Charitable contributions and religious donations

14. \$ 20.00

15. Insurance.

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance 15a. \$ 0.00

15b. Health insurance 15b. \$ 0.00

15c. Vehicle insurance 15c. \$ 266.00

15d. Other insurance. Specify: Malpractice Insurance 15d. \$ 917.00

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: 16. \$ 0.00

17. Installment or lease payments:

17a. Car payments for Vehicle 1 17a. \$ 0.00

17b. Car payments for Vehicle 2 17b. \$ 700.00

17c. Other. Specify: 17c. \$ 0.00

17d. Other. Specify: 17d. \$ 0.00

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

18. \$ 500.00

19. Other payments you make to support others who do not live with you.

\$ 0.00

Specify: 19.

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property 20a. \$ 949.00

20b. Real estate taxes 20b. \$ 150.00

20c. Property, homeowner's, or renter's insurance 20c. \$ 40.00

20d. Maintenance, repair, and upkeep expenses 20d. \$ 200.00

20e. Homeowner's association or condominium dues 20e. \$ 0.00

21. Other: Specify: tobacco

21. +\$ 300.00

22. Calculate your monthly expenses

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

\$ 15,465.00

\$

\$ 15,465.00

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from Schedule I.

23a. \$ 15,726.62

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 15,465.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$ 261.62

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain here:

Fill in this information to identify your case:

Debtor 1 **Divya Verma**
 First Name Middle Name Last Name

Debtor 2 **Lolita Doodhauth Verma**
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number **19-14883**
 (if known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Divya Verma

Divya Verma

Signature of Debtor 1

Date May 8, 2019

X /s/ Lolita Doodhauth Verma

Lolita Doodhauth Verma

Signature of Debtor 2

Date May 8, 2019

**United States Bankruptcy Court
District of Maryland**

In re **Divya Verma**
Lolita Doodhauth Verma

Debtor(s)

Case No. **19-14883**

Chapter **11**

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **May 8, 2019**

/s/ Divya Verma

Divya Verma

Signature of Debtor

Date: **May 8, 2019**

/s/ Lolita Doodhauth Verma

Lolita Doodhauth Verma

Signature of Debtor

Internal Revenue Service
Centralized Insolvency Operation
PO Box 7346
Philadelphia, PA 19101-7346

State of Maryland
Comptroller of the Currency
Compliance Division, Room 409
301 West Preston Street
Baltimore, MD 21201

Experian
PO Box 4500
Allen, TX 75013

Chex System, Inc.
Attn: Consumer Relations
7805 Hudson Road, Suite 100
Saint Paul, MN 55125

Advanced Recovery Systems
PO Box 80766
Valley Forge, PA 19484

Bankers Healthcare Group
201 Solar Street
Syracuse, NY 13204

Berlin Ramos CPA
11200 Rockville Pike, #400
Rockville, MD 20852

Bonnie Williams
4905 Brookwood Road, Apt. A
Brooklyn, MD 21225

BWW Law Group, LLC
6003 Executive Blvd., Suite 101
Rockville, MD 20852

CAO-Potomac Valley Orthopaedics
PO Box 99
Olney, MD 20830

Capital Collection Management
115 Solar Street, #100
Syracuse, NY 13204

Capital One
ATTN: BANKRUPTCY / LEGAL DEPT
PO Box 85167
Richmond, VA 23285-5167

Chase Bank USA
Card Services
PO Box 15298
Wilmington, DE 19850-5298

Chase Card Services
PO Box 15298
Wilmington, DE 19850-5298

Citibank N.A.
PO Box 6500
Sioux Falls, SD 57117

Community Radiology Assoc.
P.O. Box 64939
Baltimore, MD 21264-4939

Credit Collection Services
2 Wells Ave
Newton, MA 02459-3210

Daniel & Barbara Mangra
5813 Silk Tree Drive
Riverdale, MD 20737

Daniel Mangra
5813 Silk Tree Drive
Riverdale, MD 20737

David Durante
555 Hall Court
Havre De Grace, MD 21078

DCH Answering SVC
7404 Executive Place #300B
Lanham, MD 20706

Farmers Insurance Group
6301 Owensmouth Avenue
Woodland Hills, CA 91367

First Citizen Bank
239 Fayetteville Street
Raleigh, NC 27601

First Citizens Bank & Trust Company
Attn: Bankruptcy Department
PO Box 25187
Raleigh, NC 27611-5187

Funding Circle USA, Inc.
c/o Cohn & Dussi, LLC
68 Harrison Avenue, Suite 502
Boston, MA 02111

Greenway East Professional Center
c/o Kathleen M. Elmore
PO Box 1473
Severna Park, MD 21146

Holy Cross Hospital
1500 Forest Glen Rd
Silver Spring, MD 20910-1483

Home Depot Credit Services
Citicard Private Label
PO Box 20483
Kansas City, MO 64195-0483

JP Recovery
PO Box 16749
Rocky River, OH 44116-0749

Macy's
Bankruptcy Processing
P.O. Box 8053
Mason, OH 45040

Marion County, Florida
George Albright, Tax Collector
PO Box 970
Ocala, FL 34478

Marlin Business Bank
300 Fellowship Road
Mount Laurel, NJ 08054

McCabe, Weisberg & Conway LLC
312 Marshall Ave Suite 800
Laurel, MD 20707

McCarthy, Burgess & Wolff
26000 Cannon Rd.
Bedford, OH 44146

Metro Health Care, PC
7525 Greenway Center Drive, #202
Greenbelt, MD 20770

Mr. Cooper
PO Box 619098
Dallas, TX 75261

Nationwide Credit, Inc.
PO Box 14581
Des Moines, IA 50306

Nationwide Insurance
1 W Nationwide Blvd
Columbus, OH 43215-2226

Navy FCU
PO Box 3302
Merrifield, VA 22119-3302

Neiman-Marcus
PO Box 729080
Dallas, TX 75372

PEPCO
PO Box 97274
Washington, DC 20067-2812

Prince George's County
c/o Meyers, Rodbell & Rosenbaum, PA
6801 Kenilworth Avenue, Suite 400
Riverdale, MD 20737

Radius Global Solutions
PO Box 390905
Minneapolis, MN 55439

Reynolds Team
14399 Penrose Place, #300
Chantilly, VA 20151

Rushmore Loan Management
P.O. Box 52708
Irvine, CA 92619

Saks Fifth Avenue
3455 Hwy 80
Jackson, MS 39209

Sandy Spring Bank
17801 Georgia Ave
Olney, MD 20832-2233

Shirley Herbert
4905 Brookwood Road, #2
Brooklyn, MD 21225

Suntrust Bank
303 Peachtree St, N.E.
Atlanta, GA 30308

SunTrust Mortgage
PO Box 85526
Richmond, VA 23285

Target National Bank
PO Box 673
Minneapolis, MN 55440-0673

Toyota Financial Services
19001 S. Western Avenue
Torrance, CA 90501

Fill in this information to identify your case:

Debtor 1 **Divya Verma**
 First Name Middle Name Last Name

Debtor 2 **Lolita Doodhauth Verma**
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF MARYLAND

Case number **19-14883**
 (if known)

☐ Check if this is an amended filing

B 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.**Unsecured claim**

| | | | | |
|---|--|--|------------------------|--|
| 1 | Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346 | What is the nature of the claim? 3306 Waterford Mill Road Bowie, MD 20721 Prince Georges County Value per zillow.com (Property was previously designated as 12807 Contee Manor Road, | \$ \$185,485.08 | As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply |
| | | | | Does the creditor have a lien on your property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured) \$ \$185,485.08 Value of security: - \$ \$1,234,454.00 Unsecured claim \$ \$185,485.08 |
| | Contact _____ Contact phone _____ | | | |

| | | | | |
|---|--|--|-----------------------|---|
| 2 | Funding Circle USA, Inc. c/o Cohn & Dussi, LLC 68 Harrison Avenue, Suite 502 Boston, MA 02111 | What is the nature of the claim? Business Loan | \$ \$66,696.72 | As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated |
|---|--|--|-----------------------|---|

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

- ☒ Disputed
☐ None of the above apply

 Contact _____

 Contact phone _____

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

3

**State of Maryland
 Comptroller of the Currency
 Compliance Division, Room 409
 301 West Preston Street
 Baltimore, MD 21201**

 Contact _____

 Contact phone _____

What is the nature of the claim?

Income Taxes \$ \$44,302.00

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

4

**Navy FCU
 PO Box 3302
 Merrifield, VA 22119-3302**

 Contact _____

 Contact phone _____

What is the nature of the claim?

Credit Card \$ \$23,686.59

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

5

**State of Maryland
 Comptroller of the Currency
 Compliance Division, Room 409
 301 West Preston Street
 Baltimore, MD 21201**

What is the nature of the claim?

**3306 Waterford Mill \$ \$23,682.81
 Road Bowie, MD
 20721 Prince Georges
 County
 Value per zillow.com
 (Property was
 previously designated
 as 12807 Contee
 Manor Road,**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

Contact

Contact phone

Does the creditor have a lien on your property?

☐ No
☒ Yes. Total claim (secured and unsecured) \$ **\$23,682.81**
 Value of security: - \$ **\$1,234,454.00**
 Unsecured claim \$ **\$23,682.81**

6

First Citizen Bank
239 Fayetteville Street
Raleigh, NC 27601

Contact

Contact phone

What is the nature of the claim?

**Balance after
foreclosure**

\$ \$16,357.11

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

7

Rushmore Loan Management
P.O. Box 52708
Irvine, CA 92619

Contact

Contact phone

What is the nature of the claim?

3306 Waterford Mill \$ \$15,546.00
Road Bowie, MD
20721 Prince Georges
County
Value per zillow.com
(Property was
previously designated
as 12807 Contee
Manor Road,

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

☐ No
☒ Yes. Total claim (secured and unsecured) \$ **\$1,250,000.00**
 Value of security: - \$ **\$1,234,454.00**
 Unsecured claim \$ **\$15,546.00**

8

What is the nature of the claim?

3306 Waterford Mill \$ \$13,877.73
Road Bowie, MD
20721 Prince Georges
County
Value per zillow.com
(Property was
previously designated
as 12807 Contee

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

Manor Road,

**Prince George's County
 c/o Meyers, Rodbell &
 Rosenbaum, PA
 6801 Kenilworth Avenue, Suite
 400
 Riverdale, MD 20737**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☒ Yes. Total claim (secured and unsecured) \$ **\$13,877.73**
 Value of security: - \$ **\$1,234,454.00**
 Unsecured claim \$ **\$13,877.73**

Contact

Contact phone

9

**Citibank N.A.
 PO Box 6500
 Sioux Falls, SD 57117**

What is the nature of the claim? **Credit Card** \$ **\$13,056.13**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact

Contact phone

10

**Daniel Mangra
 5813 Silk Tree Drive
 Riverdale, MD 20737**

What is the nature of the claim? **Personal Loan** \$ **\$12,000.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact

Contact phone

11

**Bankers Healthcare Group
 201 Solar Street
 Syracuse, NY 13204**

What is the nature of the claim? **Credit Card** \$ **\$10,841.06**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

Contact

☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact phone

12

Berlin Ramos CPA
11200 Rockville Pike, #400
Rockville, MD 20852

What is the nature of the claim? **Accounting Services** \$ **\$9,120.06**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact

Contact phone

13

Chase Card Services
PO Box 15298
Wilmington, DE 19850-5298

What is the nature of the claim? **Credit Card** \$ **\$8,659.05**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact

Contact phone

14

Chase Bank USA
Card Services
PO Box 15298
Wilmington, DE 19850-5298

What is the nature of the claim? **Credit Card** \$ **\$8,659.05**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact

Contact phone

15

Bankers Healthcare Group
201 Solar Street
Syracuse, NY 13204

What is the nature of the claim? **Credit Card** \$ **\$7,610.69**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

- ☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact

Contact phone

16

Neiman-Marcus
PO Box 729080
Dallas, TX 75372

What is the nature of the claim? Credit Card **\$ \$7,500.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact

Contact phone

17

Greenway East Professional
Center
c/o Kathleen M. Elmore
PO Box 1473
Severna Park, MD 21146

What is the nature of the claim? Unknown **\$ \$6,657.60**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☒ Yes. Total claim (secured and unsecured) \$ **\$6,657.60**
 Value of security: - \$ **\$0.00**
 Unsecured claim \$ **\$6,657.60**

Contact

Contact phone

18

First Citizens Bank & Trust
Company
Attn: Bankruptcy Department
PO Box 25187
Raleigh, NC 27611-5187

What is the nature of the claim? Credit Card **\$ \$4,991.48**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact

Contact phone

Debtor 1 **Divya Verma**
 Debtor 2 **Lolita Doodhauth Verma**

Case number (if known) **19-14883**

19

Suntrust Bank
303 Peachtree St, N.E.
Atlanta, GA 30308

Contact

Contact phone

What is the nature of the claim?

Credit Card

\$ **\$4,785.30**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

20

DCH Answering SVC
7404 Executive Place #300B
Lanham, MD 20706

Contact

Contact phone

What is the nature of the claim?

Answering Service

\$ **\$4,258.18**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X /s/ Divya Verma
Divya Verma
 Signature of Debtor 1

X /s/ Lolita Doodhauth Verma
Lolita Doodhauth Verma
 Signature of Debtor 2

Date May 8, 2019

Date May 8, 2019